

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

PLAINTIFF <u>Jennifer Ann Fedorek</u>	COURT CASE NUMBER <u>C.V. - 05-186E</u>
DEFENDANT <u>Ronald Snyder, Warden</u>	TYPE OF PROCESS

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

SERVE AT { RONALD SNYDER  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

1186 Ell Street Franklin, PA. 16323

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Jennifer Ann Fedorek - 0J9802  
451 Fullerton Avenue  
Cambridge Springs, PA 16403

Number of process to be served with this Form 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

✓

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

This is a place of Business - the Venango County Prison  
Personal information (such as home address) is not available to me.

Signature of Attorney other Originator requesting service on behalf of:

Jennifer Ann Fedorek

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

N/A

DATE

2-7-06

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. _____	No. _____		

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

**FILED**

FEB 23 2006

Date

2/14/06

Time

☐ am  
☐ pm

Signature of U.S. Marshal or Deputy

Shirley Blum

Service Fee <u>Joe</u>	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges <u>Joe</u>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS 2-10-06 cert 9842 8030 6417

## PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00

COMPLETE THIS SECTION ON DELIVERY	
A. Received by (Please Print Clearly)	B. Date of Delivery
Ronald Snyder	1/19/06
C. Signature	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
x Ronald Snyder	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If YES, enter delivery address below:	
183 P 231	
PS Form 3811 January 2003	